

The Child Health Program offers training in the administration and scoring of developmental screening tools:

- **Ages and Stages Questionnaires (ASQ) and**
- **ASQ: Social Emotional**

Over 600 people have participated in the trainings. Participants learn how to explain, administer, and score the screening tool and when to refer a child for additional assessment.



COLLABORATIVE EFFORTS

- Provide health leadership
- Provide program updates to community initiatives
- Provide Results Based Accountability and Collective Impact training
- Keep partners informed about early childhood related issues and topics of interest in New Mexico and nationally
- Collaborate to align and eliminate duplication of efforts



New Mexico Department of Health

Family Health Bureau

CHILD HEALTH PROGRAM

PROMOTING CHILD WELLNESS

2014-2015



The future prosperity of any society depends on its ability to foster the health and well-being of the next generation. When a society invests wisely in children and families, the next generation will pay that back through a lifetime of productivity and responsible citizenship.

EARLY CHILDHOOD COMPREHENSIVE SYSTEMS: BUILDING HEALTH THROUGH INTEGRATION

Early Childhood Comprehensive Systems (ECCS) supports states and communities in their efforts to build and integrate early childhood service systems that address the critical components of access to comprehensive health services and medical homes; social-emotional development and mental health of young children; early care and education; parenting education; and family support.

The 2013-2016 ECCS State Team will concentrate on the expansion of developmental screening activities in early care and education settings statewide by connecting pediatric and other child health leaders with child care health consultants and child care providers to link training and referrals among medical homes, early intervention services, child care programs, and families. The target service population is children, birth-three years old.

The ECCS State Team will convene work groups to plan and implement the project within the three-year project period.

Using Results Based Accountability and the Collective Impact approach, the State Team will work on a common agenda to expand developmental screening activities. Contributions from multiple sectors will be aligned toward specific measurable results.

OBJECTIVE

Increase the number of children who receive a developmental screening

NM POPULATION INDICATOR

Percent of children, ages 9-71 months, receiving a developmental screening using a standardized parent-completed screening tool

BACKGROUND

- In the United States, about 13% of children 3 to 17 years of age have a developmental or behavioral disability such as autism, cognitive disability, or attention-deficit/hyperactivity disorder
- Results of a 2008 study in Pediatrics indicated that ~13% of children had developmental delays that would make them eligible for Part C early intervention. At 24 months, only 10% of children with delays were receiving services
- Many children have delays in language or other areas that can affect school readiness. However, fewer than half of children with developmental delays are identified before starting school, by which time significant delays already might have occurred and opportunities for treatment might have been missed.
- The American Academy of Pediatrics recommends performing developmental/behavioral screening of young children at 9, 18, and 24 or 30 months using a standardized test.
- According to the 2011/2012 National Survey of Children's Health, 38.3% of New Mexico parents reported they completed a standardized screening tool during a health care visit, compared to 30.8% nationally.
- According to the New Mexico Human Services Department Center for Medicare/Medicaid Services (CMS) Annual Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Report, 78,910 of the 109,193 eligible children, under 1 through 5 years old, received at least one initial or periodic screen. (3/31/14)
- In addition to physician screenings, many other early childhood providers in New Mexico (e.g. home visitors, early interventionists, early care and education providers) use parent-completed screening tools to screen young children for developmental or behavioral delays.
- New Mexico does not have continuity among programs offering screenings. This applies to training, tools used, periodicity, data collection, and referrals.
- Education materials vary among programs. There is not unified message about screening or child development, and resources for outreach are not aligned.

WHAT WORKS

1. Public awareness
2. Standards for developmental screening
3. Training early learning practitioners to administer standardized developmental screening tools
4. Screenings in learning and care settings, in addition to healthcare settings

WHAT DO WE PROPOSE TO DO?

- Create a public awareness campaign for developmental milestones.
- With partners, develop guidelines for screening.
- Increase Ages & Stages Questionnaire (ASQ) trainings provided to practitioners.
- Increase screenings conducted in early learning and care settings.
- Create a registry or reporting requirement and accompanying surveillance infrastructure related to developmental screenings.

<http://nmhealth.org/about/phd/fhb/mch>